AHCCCS 820 Transaction Codes and Values Mapping

#	Code or Value Set (Element Name)	Loop – Segment - Element	HIPAA Values & Descriptions	AHCCCS Values & Descriptions	Mapping Decision
1	820 Header/Transaction Set Identifier Code	820 Header - ST01	820 - Payment Order/Remittance Advice	No Equivalent	820 - Payment Order/Remittance Advice
2	Financial Information/Transaction Handling Code	Financial Information - BPR01	C - Payment Accompanies Remittance Advice D - Make Payment Only I - Remittance Information Only P - Prenotification of Future Transfers U - Split Payment and Remittance X - Handling Party's Option to Split Payment and Remittance	No Equivalent	C - Payment Accompanies Remittance Advice D - Make Payment Only I - Remittance Information Only P - Prenotification of Future Transfers **U - Split Payment and Remittance** X - Handling Party's Option to Split Payment and Remittance
3	Financial Information/Credit or Debit Flag Code	Financial Information - BPR03	C - Credit D - Debit - Not allowed under HIPAA	No Equivalent	**C - Credit** D - Debit - Not allowed under HIPAA
4	Financial Information/Payment Method Code	Financial Information - BPR04	ACH - Automated Clearing House (ACH) BOP - Financial Institution Option CHK - Check FWT - Federal Reserve Funds/Wire Transfer - Nonrepetitive SWT - Society for Worldwide Interbank Financial Telecommunications (S.W.I.F.T.)	No Equivalent	**ACH - Automated Clearing House (**ACH) BOP - Financial Institution Option **CHK - Check** **FWT - Federal Reserve Funds/Wire Transfer - Nonrepetitive** SWT - Society for Worldwide Interbank Financial Telecommunications (S.W.I.F.T.)
5	Financial Information/Payment Format Code	Financial Information - BPR05	CCP - Cash Concentration/Disbursement plus Addenda (CCD+) (ACH) CTX - Corporate Trade Exchange (CTX) (ACH)	No Equivalent	CCP - Cash Concentration/Disbursement plus Addenda (CCD+) (ACH) CTX - Corporate Trade Exchange (CTX) (ACH)
6	Financial Information/Depository Financial Institution (DFI) Identification Number Qualifier	Financial Information - BPR06	01 - ABA Transit Routing Number Including Check Digits (9 digits) 04 - Canadian Bank Branch and Institution Number	No Equivalent	**01 - ABA Transit Routing Number Including Check Digits (9 digits)** 04 - Canadian Bank Branch and Institution Number
7	Financial Information/Account Number Qualifier	Financial Information - BPR08	ALC - Agency Location Code (ALC) DA - Demand Deposit	No Equivalent	ALC - Agency Location Code (ALC) **DA - Demand Deposit**
8	Financial Information/Depository Financial Institution (DFI) Identification Number Qualifier	Financial Information - BPR12	01 - ABA Transit Routing Number Including Check Digits (9 digits) 04 - Canadian Bank Branch and Institution Number	No Equivalent	**01 - ABA Transit Routing Number Including Check Digits (9 digits)** 04 - Canadian Bank Branch and Institution Number

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9	Financial Information/Account Number Qualifier	Financial Information - BPR14	DA - Demand Deposit SG - Savings	No Equivalent	DA - Demand Deposit SG - Savings
10	Reassociation Key/Trace Type Code	Reassociation Key - TRN01	1 - Current Transaction Trace Numbers 3 - Financial Reassociation Trace Number	No Equivalent	1 - Current Transaction Trace Numbers 3 - Financial Reassociation Trace Number
11	Non-US Dollars Currency/Entity Identifier Code	Non-US Dollars Currency - CUR01	2B - Third-Party Administrator PR - Payer	No Equivalent	2B - Third-Party Administrator PR - Payer
12	Premium Receivers Identification Key/Reference Identification Qualifier	Premium Receivers Identification Key - REF01	14 - Master Account Number - Required under HIPAA 18 - Plan Number 2F - Consolidated Invoice Number 38 - Master Policy Number 72 - Schedule Reference Number	No Equivalent	**14 - Master Account Number - Required under HIPAA** 18 - Plan Number 2F - Consolidated Invoice Number 38 - Master Policy Number 72 - Schedule Reference Number
13	Process Date/Date Time Qualifier	Process Date - DTM01	009 - Process - Not used for HIPAA	No Equivalent	009 - Process - Not used for HIPAA
14	Delivery Date/Date Time Qualifier	Delivery Date - DTM01	035 - Delivered - Not used for HIPAA	No Equivalent	035 - Delivered - Not used for HIPAA
15	Coverage Period/Date Time Qualifier	Coverage Period - DTM01	582 - Report Period	No Equivalent	582 - Report Period
16	Coverage Period/Date Time Period Format Qualifier	Coverage Period - DTM05	RD8 - Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD	No Equivalent	RD8 - Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD
17	Premium Receiver's Name/Entity Identifier Code	1000A - N101	PE - Payee	No Equivalent	PE - Payee
18	Premium Receiver's Name/Identification Code Qualifier	1000A - N103	1 - D-U-N-S Number, Dun & Bradstreet 9 - D-U-N-S+4, D-U-N-S Number with Four Character Suffix EQ - Insurance Company Assigned Identification Number FI - Federal Taxpayer's Identification Number XV - Health Care Financing Administration National PlanID Required if the National PlanID is mandated for use. Otherwise, one of the other listed codes may be used.	No Equivalent	1 - D-U-N-S Number, Dun & Bradstreet 9 - D-U-N-S+4, D-U-N-S Number with Four Character Suffix EQ - Insurance Company Assigned Identification Number **FI - Federal Taxpayer's Identification Number** XV - Health Care Financing Administration National PlanID Required if the National PlanID is mandated for use. Otherwise, one of the other listed codes may be used.

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#	Code or Value Set (Element Name)	Loop – Segment - Element	HIPAA Values & Descriptions	AHCCCS Values & Descriptions	Mapping Decision
19	Premium Payer's Name/Entity Identifier Code	1000B - N101	PR - Payer	No Equivalent	PR - Payer
20	Premium Payer's Name/Identification Code Qualifier	1000B - N103	1 - D-U-N-S Number, Dun & Bradstreet 24 - Employer's Identification Number 75 - State or Province Assigned Number 9 - D-U-N-S+4, D-U-N-S Number with Four Character Suffix EQ - Insurance Company Assigned Identification Number FI - Federal Taxpayer's Identification Number PI - Payor Identification	No Equivalent	1 - D-U-N-S Number, Dun & Bradstreet 24 - Employer's Identification Number 75 - State or Province Assigned Number 9 - D-U-N-S+4, D-U-N-S Number with Four Character Suffix EQ - Insurance Company Assigned Identification Number **FI - Federal Taxpayer's Identification Number** PI - Payor Identification
21	Premium Payer's Administrative Contact/Contact Function Code	1000B - PER01	IC - Information Contact	No Equivalent	IC - Information Contact
22	Premium Payer's Administrative Contact/Communication Number Qualifier	1000B - PER03	EM - Electronic Mail FX - Facsimile TE - Telephone	No Equivalent	EM - Electronic Mail FX - Facsimile TE - Telephone
23	Premium Payer's Administrative Contact/Communication Number Qualifier	1000B - PER05	EM - Electronic Mail EX - Telephone Extension FX - Facsimile TE - Telephone	No Equivalent	EM - Electronic Mail EX - Telephone Extension FX - Facsimile TE - Telephone
24	Premium Payer's Administrative Contact/Communication Number Qualifier	1000B - PER07	EM - Electronic Mail EX - Telephone Extension FX - Facsimile TE - Telephone	No Equivalent	EM - Electronic Mail EX - Telephone Extension FX - Facsimile TE - Telephone
25	Organization Summary Remittance/Entity Identifier Code	2000A - ENT02	2L - Corporation	No Equivalent	2L - Corporation
26	Organization Summary Remittance/Identification Code Qualifier	2000A - ENT03	1 - D-U-N-S Number, Dun & Bradstreet 9 - D-U-N-S+4, D-U-N-S Number with Four Character Suffix FI - Federal Taxpayer's Identification Number	No Equivalent	1 - D-U-N-S Number, Dun & Bradstreet 9 - D-U-N-S+4, D-U-N-S Number with Four Character Suffix **FI - Federal Taxpayer's Identification Number**
27	Organization Summary Remittance Detail/Reference Identification Qualifier	2300A - RMR01	11 - Account Number 1L - Group or Policy Number CT - Contract Number IK - Invoice Number	No Equivalent	11 - Account Number **1L - Group or Policy Number** CT - Contract Number IK - Invoice Number

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#	Code or Value Set (Element Name)	Loop – Segment - Element	HIPAA Values & Descriptions	AHCCCS Values & Descriptions	Mapping Decision
28	Organization Summary Remittance Detail/Payment Action Code	2300A - RMR03	PA - Payment in Advance PI - Pay Item PO - Payment on Account PP - Partial Payment	No Equivalent	**PA - Payment in Advance** PI - Pay Item **PO - Payment on Account** PP - Partial Payment
29	Member Count/Information Only Indicator	2315A - SLN03	O - Information Only	No Equivalent	O - Information Only
30	Member Count/Unit or Basis for Measurement Code	2315A - SLN05 - 01	10 - Group IE - Person PR - Pair	No Equivalent	10 - Group **IE - Person** PR - Pair
31	Organization Summary Remittance Level Adjustment/Adjustment Reason Code	2320A - ADX02	20 - Balance Due Declined 52 - Credit for Previous Overpayment 53 - Remittance for Previous Underpayment AA - Prepaid Benefit or Advances H1 - Information Forthcoming H6 - Partial Payment Remitted IA - Invoice Amount Does Not Match Account Analysis Statement J3 - Promised Adjustment Not Received	No Equivalent	20 - Balance Due Declined 52 - Credit for Previous Overpayment 53 - Remittance for Previous Underpayment AA - Prepaid Benefit or Advances H1 - Information Forthcoming H6 - Partial Payment Remitted IA - Invoice Amount Does Not Match Account Analysis Statement J3 - Promised Adjustment Not Received
32	Individual Remittance/Entity Identifier Code	2000B - ENT02	2J - Individual	No Equivalent	2J - Individual
33	Individual Remittance/Identification Code Qualifier	2000B - ENT03	34 - Social Security Number EI - Employee Identification Number ZZ - Mutually Defined	No Equivalent	34 - Social Security Number EI - Employee Identification Number **ZZ - Mutually Defined**
34	Individual Name/Entity Identifier Code	2100B - NM101	EY - Employee Name QE - Policyholder	No Equivalent	EY - Employee Name **QE - Policyholder**
35	Individual Name/Entity Type Qualifier	2100B - NM102	1 - Person	No Equivalent	1 - Person
36	Individual Name/Identification Code Qualifier	2100B - NM108	34 - Social Security Number EI - Employee Identification Number N - Insured's Unique Identification Number	No Equivalent	**34 - Social Security Number** EI - Employee Identification Number N - Insured's Unique Identification Number

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AHCCCS 820 Transaction Codes and Values Mapping

#	Code or Value Set (Element Name)	Loop – Segment - Element	HIPAA Values & Descriptions	AHCCCS Values & Descriptions	Mapping Decision
37	Individual Premium Remittance Detail/Reference Identification Qualifier	2300B - RMR01	11 - Account Number 9J - Pension Contract AZ - Health Insurance Policy Number B7 - Life Insurance Policy Number CT - Contract Number ID - Insurance Certificate Number IG - Insurance Policy Number IK - Invoice Number KW - Certification	No Equivalent	11 - Account Number 9J - Pension Contract **AZ - Health Insurance Policy Number** B7 - Life Insurance Policy Number CT - Contract Number ID - Insurance Certificate Number IG - Insurance Policy Number IK - Invoice Number KW - Certification
38	Individual Premium Remittance Detail/Payment Action Code	2300B - RMR03	PI - Pay Item PP - Partial Payment	No Equivalent	**PI - Pay Item** PP - Partial Payment
39	Individual Coverage Period/Date Time Qualifier	2300B - DTM01	582 - Report Period	No Equivalent	582 - Report Period
40	Individual Coverage Period/Date Time Period Format Qualifier	2300B - DTM05	RD8 - Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD	No Equivalent	RD8 - Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD
41	Individual Premium Adjustment/Adjustment Reason Code	2320B - ADX02	20 - Balance Due Declined 52 - Credit for Previous Overpayment 53 - Remittance for Previous Underpayment AA - Prepaid Benefit or Advances AX - Person No Longer Employed H1 - Information Forthcoming H6 - Partial Payment Remitted IA - Invoice Amount Does Not Match Account Analysis Statement J3 - Promised Adjustment Not Received	No Equivalent	20 - Balance Due Declined 52 - Credit for Previous Overpayment 53 - Remittance for Previous Underpayment AA - Prepaid Benefit or Advances AX - Person No Longer Employed H1 - Information Forthcoming H6 - Partial Payment Remitted IA - Invoice Amount Does Not Match Account Analysis Statement J3 - Promised Adjustment Not Received
42	820 Trailer/Transaction Segment Count	- SE01			
43	820 Trailer/Transaction Set Control Number	- SE02			

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